

Aging and Adult Services Agency 2020 ANNUAL REPORT



STATE OF MICHIGAN
Department of Health & Human Services
Aging and Adult Services Agency
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Michigan.gov/AASA

Gretchen Whitmer, Governor

Robert Gordon, Director

Dr. Joneigh Khaldun, Chief Medical Executive and Chief Deputy
Director for Health

Dr. Alexis Travis, Senior Deputy Director, Aging & Adult Services
Agency

Vision

For Michigan residents to live well and thrive as they age.

Mission

To provide statewide leadership, direction and resources to support
Michigan's aging, adult and disability networks, with the aim of
helping residents live with dignity, meaning, purpose, and
independence.

The Michigan Department of Health and Human Services does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identify or expression, political beliefs or disability.

The Aging and Adult Services Agency is an equal opportunity employer and program provider.



A message from Dr. Alexis Travis, Senior Deputy Director

Greetings from the Aging and Adult Services Agency,

As I write this, the toll of the COVID-19 pandemic weighs heavy on my heart, especially as I think about older Michiganders. Eighty nine percent of confirmed COVID-19 deaths in Michigan are in individuals age 60 and over. This is the largest part of the population the Aging and Adult Services Agency (AASA) serves. Our mission at AASA is to help residents thrive in the community setting they call home, and live with dignity, meaning, purpose and independence.



This report highlights the work accomplished in the final year of the 2018-2020 State Plan on Aging, as well as the Michigan aging network response to the COVID-19 pandemic. This year our network was pushed to its limits as it continued its life-sustaining work of providing programs such as home-delivered meals and personal care services, while persevering and expanding programs to meet the increase in demand for services. Under the leadership of Director Robert Gordon and Dr. Joneigh Khaldun our agency was able to empower our network to quickly adapt to meet community needs, making it easier for older adults in need to connect with aging services. We found opportunities to enhance relationships with existing partners such as AARP Michigan on the age-friendly initiative and foster new relationships with partners such as Food Bank Council of Michigan, Michigan Community Service Commission and technology vendors including BellAge Inc. and GetSetUp.

While the pandemic certainly dominated our work last year, we also persevered in our pursuit of advancing our strategic initiatives to support and increase the direct care workforce, provide timely home and community-based services, help Michiganders find appropriate services at the right time, and address Alzheimer's disease and related dementias. We restructured our agency, creating two new divisions and three new sections, including Health Promotion and Active Aging. In August, Governor Gretchen Whitmer issued an Executive Directive recognizing and addressing racism as a public health crisis. We began and will continue to examine all of our work through an equity lens and look for ways to ensure our programs address social determinants of health. Our work is informed by and grounded in data as we leverage technology and data systems to measure outcomes.

As I reflect on the previous year I am filled with great gratitude and pride. Gratitude for our state leadership, the AASA team, and the professional staff and volunteers who truly are the lifeblood of the aging network. I am incredibly proud of our collective work and all we achieved this year. This year we were recognized by both the Administration for Community Living (ACL) and ADvancing States, the national association for state units on aging, for our innovative and collaborative work. We are building momentum towards reaching our goals to support older adults to age in place and I cannot wait to see where our next State Plan on Aging takes us in 2020 through 2023.

Sincerely,

Dr. Alexis Travis
Senior Deputy Director



Addressing the COVID-19 pandemic

There is no question that the COVID-19 pandemic shaped the work of AASA throughout the final six months of fiscal year 20. The Michigan aging network rallied quickly to address the evolving needs of older Michiganders. Throughout the document, AASA's response to COVID-19 is highlighted in the context of four State Plan on Aging goals, as well as in programmatic highlights and policy and financial management.

AASA devoted resources to ensure Michiganders understood what services were available to support them and how to connect with those services. For example, last year AASA ran its first paid advertising campaign. The purpose of the campaign was to increase awareness of services through the area agencies on aging such as home-delivered meals, friendly check-ins, support for caregivers and care management. Ads like the one below ran in both English and Spanish and more information is available on page 7 of this report.

As the aging network pandemic response continues into fiscal year 21, AASA will continue to implement new initiatives and look for opportunities to broaden both knowledge of aging services within Michigan and utilization of those services. The need to support older Michiganders will last well beyond the pandemic and the Michigan aging network, led by AASA, stands ready.



Personas mayores, manténgase a salvo. La ayuda está cerca.

- Comidas a domicilio
- Registro amigable
- Administración de cuidados
- Apoyo para cuidadores

¿Te sientes solo durante la pandemia de COVID-19? Tu no lo estás.

Tu Area Agency on Aging local, está aquí para ayudar. Permítanos conectarlo con recursos que pueden brindarle tranquilidad durante este tiempo. Si usted es una persona mayor aislada o un familiar preocupado, obtenga más información sobre los servicios que brindamos.

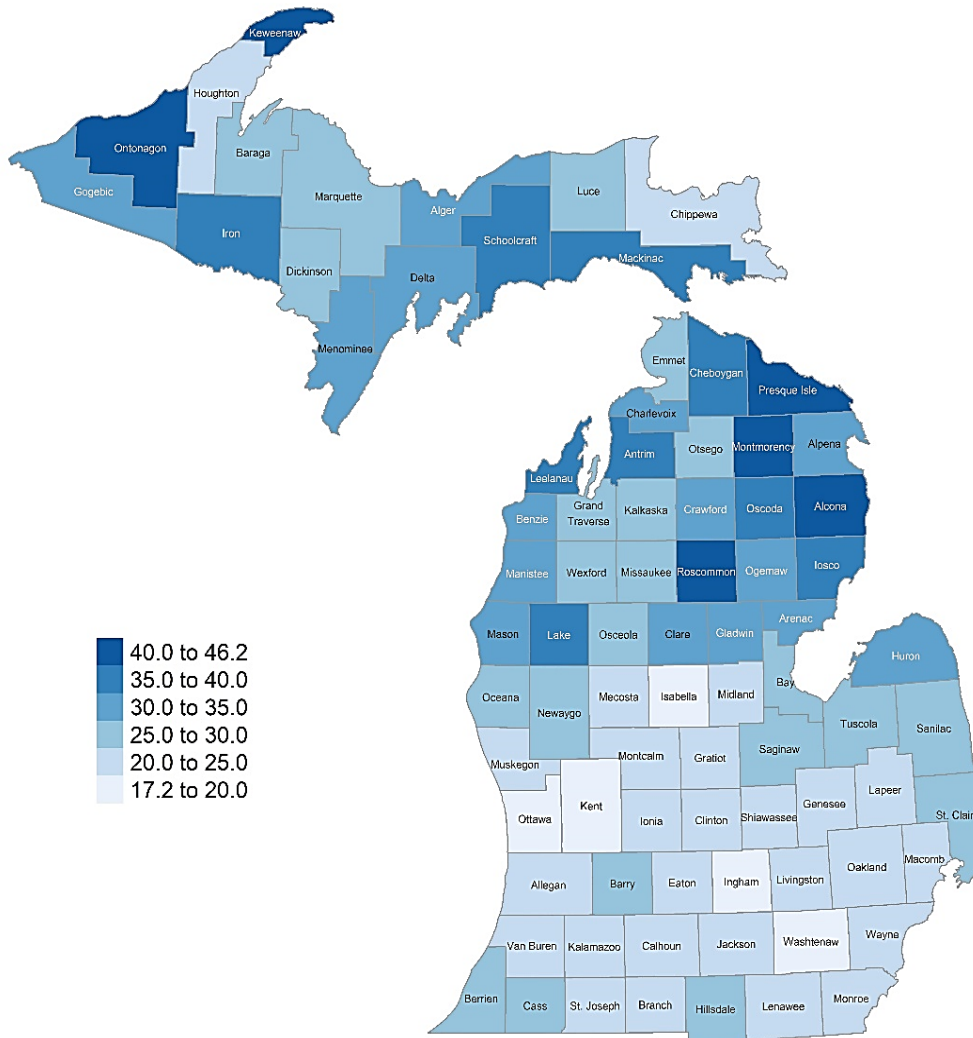
Vaya a Michigan.gov/AASA o llame al Localizador de atención para adultos mayores al 1-800-677-1116.
Para preguntas relacionadas con la salud, llame a la línea directa de COVID-19 al 1-888-535-6136.





Older Michiganders at a glance

Percentage of Michigan's population age 60+ by county



Source: U.S. Census Bureau, 2018 ACS 5-year estimates, Table S0101

2.4 million adults age 60+ reside in Michigan. This is 24.4% of the state's population.

The 60+ population is expected to peak in 2034 at 2.9 million.



41% of adults age 60+ live alone and 31.4% of adults age 60+ have a disability.

Detroit Area Agency on Aging 2019 Senior Friendship Day.



State Plan Goal 1: Advocate for, inform and empower those we serve

Age-Friendly Michigan

Last year AASA applied to join the World Health Organization/AARP age-friendly communities and states network. In October 2019, Governor Gretchen Whitmer announced Michigan as the first state in the Midwest and fifth state in the nation to commit to becoming age-friendly. Additionally, AASA created an aging stakeholder advisory committee to inform the 2020-2023 State Plan on Aging and to drive the work for Age-Friendly Michigan. This group includes Area Agency on Aging Association of Michigan, AARP, Alzheimer's Association Michigan Chapter, Michigan Commission on Services to the Aging, Michigan Directors of Services to the Aging, MDHHS Medical Services Administration, MDHHS Public Health Administration, Michigan Association of Senior Centers, Leading Age, Michigan Health and Hospital Association and the Michigan Public Health Institute.



Governor Whitmer declaring Michigan an age-friendly state in October 2019.

State Plan on Aging: FY 2021-2023

As the designated State Unit on Aging, the Aging and Adult Services Agency, under the Michigan Department of Health and Human Services, is granted authority to develop and administer a State Plan on Aging and is responsible for coordination of all state activities related to the purposes of the Older Americans Act of 1965, as amended, and the Older Michiganians Act of 1981. The new State Plan was submitted to the Administration for Community Living (ACL) in September 2020 after a comprehensive process inclusive of many stakeholders. This State Plan builds on the strengths of Michigan's aging network and aligns with its mission to deliver services in a person-centered, cost effective way that best meets individual needs. It was developed by Michigan Public Health Institute under the leadership of AASA and the Commission on Services to the Aging. Additionally, it was informed through engagement and input from a diverse group of older adults and partners across the aging network including:



Most of the Community Conversations took place pre-pandemic, between January and mid-March 2020, including this one in Detroit. AASA hosted three Community Conversations virtually in March 2020 due to the COVID-19 pandemic.

- 17 key informant interviews.
- 16 facilitated community conversations, one in each area agency on aging region.
- 6 facilitated focus groups.
- 1,199 responses to a statewide older adult survey.
- Review of 43 documents, including all area agency on aging local-level plans.



State Plan Goal 1: Advocate for, inform and empower those we serve

Legislative Advocacy

In addition to AASA's presentation of Governor Gretchen Whitmer's budget to the house and senate appropriations committees, we engaged in the following work:

- Supported legislation to create a kinship caregiver navigator and kinship caregiver advisory council.
- Successfully advocated for inclusion of direct care workers in Older Americans Act-funded programs in the temporary premium pay increases in response to the COVID-19 pandemic.
- Supported the work of the Commission on Services to the Aging in its recommendations of strategies to address the direct care workforce shortage and home and community-based services program waitlist.
- Developed and distributed a [policy brief](#) on the direct care worker shortage in Michigan.

COVID-19 Response: Informing and Empowering Older Adults and Caregivers

Adults age 60 and over represent 24 percent of confirmed COVID-19 cases and 87 to 89 percent of confirmed COVID-19 deaths in Michigan. Keeping older Michiganders safe during the pandemic is a priority for AASA. The agency recognizes the importance of ensuring people know where to turn for services. Steps AASA took to inform and empower clients include:



- Established a statewide landing page for volunteers to support older adults during the pandemic. Volunteers were routed to the Michigan Community Service Commission (MCSC). Area agencies on aging registered volunteer opportunities on the platform. Volunteers were connected to local volunteer opportunities with the AAAs through the MCSC.
- Established a new COVID-19 aging data dashboard by area agency on aging region, highlighting data on individuals age 60 and over. The dashboard is available at [Michigan.gov/AASA](#).
- Secured funding from the Michigan Health Endowment Fund to establish a statewide toll-free number for older adults and persons with disabilities to easily connect with service agencies, including the area agencies on aging and centers for independent living. The toll-free line will be available for residents in fiscal year 21.
- Increased overall awareness of the aging network by launching the first Michigan aging network paid advertising campaign in both English and Spanish. Radio ads ran statewide, and print ads ran in targeted minority and Spanish publications. AASA also ran digital and social media ads targeted toward older adults and their caregivers.

Paid media campaign impressions

Radio: 15,422,076

Print: 190,000

Total: 15,612,076

Campaign ran April 27 – May 31, 2020



State Plan Goal 2: Help older adults maintain health and independence at home and in the community

The 2018 AARP Home and Community Preferences survey found that three out of four adults age 50 and older want to stay in their homes and communities as they age. Older Americans Act programs play a crucial role in helping Michiganders remain healthy and independent at home and in the community.

Nutrition Services

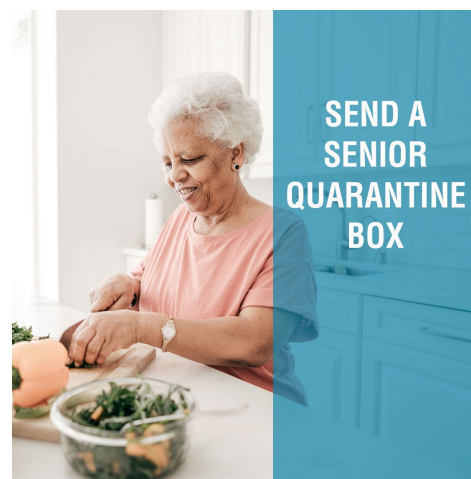
Nutrition services such as home-delivered meals (HDM) and congregate meal programs are designed to promote the general health and well-being of older individuals. The services are intended to:

- Reduce hunger, food insecurity and malnutrition of older adults.
- Promote socialization of older individuals.
- Promote the health and well-being of older adults by assisting them in gaining access to nutrition and other disease prevention and health promotion services.
- Promote the health and well-being of older adults to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior.

In fiscal year 20, a total of 51,726 home-delivered meal (HDM) participants received 8,954,050 meals. A total of 39,570 congregate meal participants received 1,768,745 meals. Congregate meal sites closed as a result of the pandemic and many pivoted to offer to-go meals and, when necessary, connected participants alternate nutrition support services.

COVID-19 Response: Quarantine Boxes

AASA partnered with Food Bank Council of Michigan on the Quarantine Box (Q Box) project to provide boxes of non-perishable food items to older adults remaining at home as a result of the pandemic. A Q Box contains 22 highly nutritional self-stable USDA standard meals. A total of 30,100 boxes were delivered to or picked up by older adults as of September 30, 2020. AASA also partnered with the Food Bank Council of Michigan on a virtual statewide food drive to expand the Q Box program, raising \$51,882 from the public through individual donations. The aging network also partnered with the Michigan Community Service Commission (MCSC) on securing volunteers to assist with distribution.



COVID-19 Response: USDA Farmers to Families Food Boxes

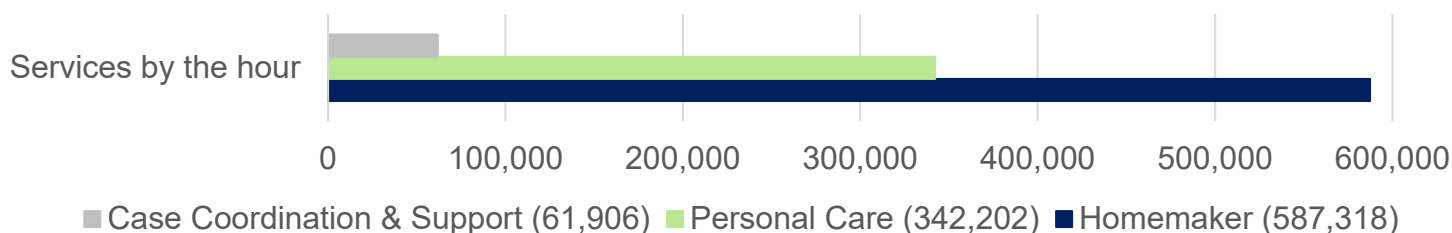
AASA partnered with Van Eerden Foodservice and LaGrasso Brothers Produce on the United States Department of Agriculture (USDA) Farmers to Families Food Box program. The program delivered a total of 115,427 pounds of fresh fruit, vegetable and dairy boxes to over 108,000 homebound older Michiganders through the area agencies on aging. The AAAs delivered boxes to individuals seeking temporary food assistance as the result of the pandemic, individuals on home-delivered meals waitlists, and to enhance existing home-delivered meals services when clients could accept, prepare and consume fresh fruits and vegetables. Dr. Alexis Travis and executive director of Area Agency on Aging West Michigan Jackie O'Conner had the opportunity to meet Secretary of Agriculture Sonny Perdue this summer at an event supporting the program.



State Plan Goal 2: Help older adults maintain health and independence at home and in the community

Community-based services provide individuals the opportunity to thrive in place by receiving services in the setting of their choice. These services are vital to helping older adults maintain independence at home and in the community. Services provided reflect the unique needs, characteristics and choices of the individual through a person-centered planning approach.

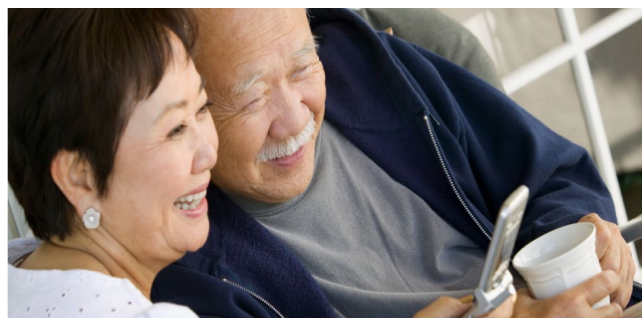
In fiscal year 20, the aging network saw an increase in requests for information and assistance, providing a total of 134,687 hours of service. This was an increase of 30,000 hours over last fiscal year. A total of 21,185 unduplicated clients received case management and in-home services. The top three in-home services provided were:



COVID-19 Response: Information and assistance

AASA created a landing page on our website for older adults to request assistance with food or to sign up to receive friendly reassurance phone calls. An additional 8,858 Michiganders were connected to aging network services as a result.

Friendly reassurance calls are check-in calls to assure an individual is safe and basic needs are being met. The program serves as a bridge to resources and helps combat social isolation. As a result of the pandemic, the aging network expanded availability of friendly reassurance to all 83 counties. In fiscal year 20, AASA-funded friendly reassurance programs supported 7,027 individuals who received 34,096 calls.



You can help older Michiganders

Make a call and check-in

Remember to reach out to your older friends and neighbors.

Michigan.gov/AASA



Access and Community Services Highlights

- 66,078 hours of senior center operations funded.
- 16,030 assistive devices and technologies deployed to 4,385 individuals.
- 30,580 hours of legal assistance provided to 17,575 individuals.
- 5,088 hours to develop coordinated, comprehensive elder abuse prevention services.
- 1,723 safety devices installed, or maintenance performed in individual resident homes.
- 600 hours of counseling services provided.
- 2,607 older adults received medication management services.
- 60,569 hours of outreach services provided.
- 114,139 one-way, one person rides provided.



State Plan Goal 2: Help older adults maintain health and independence at home and in the community

Caregiving

According to the 2017 Behavioral Risk Factor Surveillance System (BRFSS) data, one in five Michiganders is a caregiver, meaning they provide regular care or assistance to a friend or family member with a health issue or disability. Nearly half have provided care for at least two years and a fourth have provided care for at least 20 hours per week. The Michigan aging network assists caregivers by offering programs to help address the challenges informal caregivers may face.

The aging network supported 5,233 caregivers by providing 612,645 hours of adult day care, respite care, counseling services, training, and supplemental care. Additionally, 119,252 home-delivered meals were served as respite care, an increase of 74,124 meals over the previous fiscal year.

AASA has a strategic focus to address dementia and in fiscal year 20, 87 participants and/or caregivers participated in Developing Dementia Dexterity (DDD). As part of the dementia capability goal of DDD, the area agencies on aging hosted 28 dementia training sessions for professional caregivers, reaching 509 attendees. Additionally, 67 caregivers participated in Creating Confident Caregivers (CCC).

Direct Care Workforce Advisory Committee

Professional caregivers play a crucial role in allowing older adults to maintain health and independence at home and in the community. According to PHI, Michigan needs 34,090 more trained direct care workers (DCWs) than are currently in the workforce, due in part to a rapidly growing aging population. Low wage levels, lack of affordable comprehensive training, and low job appreciation and respect are all drivers of the DCW shortage. Various strategies can be employed to build capacity and overcome current challenges. AASA took the lead on forming a Direct Care Worker Advisory Committee to MDHHS. This committee includes representatives from state agencies, advocacy groups, providers, home and long-term care representatives and direct care workers themselves. The committee established statewide competency and training standards and, in response to COVID-19, produced a policy brief on personal protective equipment (PPE) and direct care workers.



COVID-19 Response: Direct care workers

AASA partnered with ADvancing States to promote [Connect to Care Jobs](#), an online platform that matches jobseekers in the health care field with long term supports and services employers that need to immediately hire for long- and short-term positions, including certified nursing assistants, registered nurses and licensed practical nurses. When the platform launched in July it was only available to licensed long term care facilities. The platform opened to all LTSS employers in October 2020.

State Plan Goal 3: Promote elder and vulnerable adult rights and justice

The Michigan Long Term Care Ombudsman Program (MLTCOP) strives to improve the quality of care and quality of life for residents of skilled nursing homes (SNF), homes for the aged (HFA) and adult foster care (AFC). AASA contracts with the Michigan Advocacy Program (MAP) to carry out all ombudsman duties. In fiscal year 20, MLTCOP reported:

- 1,329 cases opened
- 1,286 cases closed
- 2,650 complaints investigated in closed cases
- 8,121 information and assistance* cases
 - 5,319 to individuals
 - 2,802 to staff members

**the MLTCOP also fielded calls from family members and residents of assisted living and other unlicensed settings.*



COVID313 Town Hall Week 26 | Rules are changing regarding access to nursing homes.

COVID-19 Response: State Long Term Care Ombudsman Program

MLTCOP hosted weekly calls for residents and families to receive updates on COVID-related executive orders and guidance, discuss advocacy approaches for visitation and to answer questions from participants. The calls started on April 29. From April 29 through September 30, approximately 500 residents and families participated in these calls.

The Michigan long term care ombudsman served on Governor Gretchen Whitmer's Nursing Home COVID-19 Preparedness Task Force and chaired the quality of life subcommittee. She led a group of diverse members all dedicated to improving the quality of life for residents by addressing visitation and isolation during the pandemic. The workgroup presented 13 recommendations to the task force which were included in the final report to the governor. The ombudsman also participated in the Implicit Bias Training Advisory Workgroup led by the Michigan Department of Licensing and Regulatory Affairs (LARA). An assistant ombudsman and a local ombudsman served on two sub-workgroups to provide their input and expertise on this important issue as it affects the population served by the program.

The MLTCOP provided recommendations to the MDHHS staff leading the response to COVID-19 relating to PPE, testing, staffing shortages, visitation and placement options for those recovering from the virus.

The Michigan long term care ombudsman fielded calls and inquired from legislators and participated in several legislative oversight committee hearings related to COVID-19 executive orders and the impact of the pandemic and orders on long term care facility residents.

Ombudsmen participated in 42 interviews with local, state and national media outlets on the impact of COVID on long term care residents, including a radio interview with National Public Radio (NPR).

A full report of the Michigan Long Term Care Ombudsman Program activities in fiscal year 20 will be published by January 31, 2021.



State Plan Goal 3: Promote elder and vulnerable adult rights and justice

More than 73,000 older adults in Michigan are victims of elder abuse, according to the Michigan Department of the Attorney General. They experience abuse, neglect and exploitation. The symptoms and treatment of elder abuse are complex and demand a concerted effort to tackle this often unrecognized and unreported social problem.

Adult Protective Services

Adult Protective Services (APS) provides protection to vulnerable adults who are at risk of harm due to the presence or threat of abuse, neglect or exploitation. The Office of Adult Services (field services) is housed within the Economic Stability Administration (ESA) at MDHHS while AASA oversees adult protective services policy and works in coordination with ESA.

In response to COVID-19, AASA issued guidance for visitation to keep both APS workers and clients safe.

Notify the Michigan Department of Health and Human Services Adult Protective Services at 1-855-444-3911, if you suspect abuse, neglect or exploitation occurred in:

- A private residence;
- An unlicensed setting (i.e., assisted living facility);
- An adult foster care home;
- A home for the aged; or
- A nursing home where the suspected perpetrator is not an employee of the facility or the resident is on leave from the nursing home.



The toll-free number is available 24 hours per day.

Adult Protective Services referrals totaled 48,441.


20,808 cases were opened.

27,613 cases were denied.

Legal Services Program provides legal services to clients age 60 or older and served 7,092 clients and 14,200 unduplicated cases.

4,160 individuals participated in 165 community education presentations.

Awarded \$965,000 through the **Prevent Elder and Vulnerable Adult Abuse, Exploitation, Neglect Today (PREVNT)** grant program to 12 community agencies.



State Plan Goal 4: Conduct responsible quality management and coordination of the aging network

In fiscal year 20, AASA aligned its internal staffing structure with essential functions and built additional capacity by creating two new divisions and three new sections, including Health Promotion and Policy Management Division and Operations and Aging Network Support Division. AASA integrated work around continuous quality improvement (CQI) into the Technical Assistance and Quality Improvement section within the agency and initiated CQI projects on care transitions and information and assistance.

Policy and Financial Management

Following the state of emergency declaration, the Commission on Services to the Aging granted the senior deputy director the authority to approve flexibility for the AAAs to implement contingency measures outside of their approved annual implementation plans. Ultimately, AASA issued 86 policy waivers for local AAAs and aging network agencies to respond to increased demand for programs, the provision of services “remotely” and the provision of community-based services in virtual settings. Examples include:

- In-home community health workers/direct care workers connecting with health departments utilizing video conference software to assist with COVID-19 testing.
- A self-determination service provider option to help AAAs secure care for care management clients facing situations where a current service provider is unable to meet the client’s care needs and the client may have a trusted individual that could step in and provide care.
- Utilizing senior transportation services to support medical appointments, grocery shopping or grocery pick up and prescription pick up or delivery.
- Expand the respite care service unit definition to include weekly wellness checks with family caregivers and clients, weekly “support group” phone calls with family caregivers and when appropriate, use respite staff to deliver food, medications and essential items to caregivers/clients.

Additionally, AASA quickly expedited distribution of \$25,268,215 from CARES Act and \$7,600,868 from Families First Coronavirus Response Act to ensure the aging network could maximize funds to meet pressing service needs.

Throughout the year, AASA provided guidance and technical assistance as a means for ensuring the area agencies on aging and other grantees were complying with award agreements, regardless of the fund source.

Quality Management and Coordination: Assuring Diversity, Equity and Inclusion

This summer AASA rolled out a new program development objective for each area agency on aging fiscal year 21 Area Plan. The objective is to improve the accessibility of services to Michigan’s communities and people of color, persons with disabilities, recent immigrants and LGBTQ+ individuals. In Area Plans each AAA was required to:

- Assess and describe how the area agency is currently addressing accessibility for the groups listed above and complete the objective(s), strategies and activities that are indicated for quality improvement in this area. Include planned efforts to:
 - Ensure that AAA staff and subcontractors are trained in diversity, equity and inclusion
 - Ensure that AAA staff and subcontractors are trained on how to recognize and address unconscious bias.
 - Ensure that programming and outreach is culturally sensitive and welcoming to all.
 - Ensure that culturally and linguistically appropriate outreach is directed to non-English speaking persons and that providers are trained to adapt to diverse cultural needs.

State Plan Goal 4: Conduct responsible quality management and coordination of the aging network

Emergency response

Once a state of emergency was declared in response to the COVID-19 pandemic, AASA staff sprung into action, participating in ongoing briefings and updates from the Michigan State Police's State Emergency Operations Center (SEOC).

AASA played a critical role in getting much needed personal protective equipment (PPE) into the hands of those working directly with older adults in home and community-based settings through our area agencies on aging. In fact, AASA staff went to great lengths to ensure needed materials were delivered in a timely manner to all 16 regions of the state. With PPE in heavy demand, AASA successfully advocated for and deployed 1,140,298 units of PPE. Items in high demand included surgical masks, goggles, masks and face shields, gloves, shoe covers, disposable gowns, non-contact thermometers, liquid soap, disinfecting wipes, and hand sanitizer. AASA deployed 622,500 gloves and 376,346 masks and face shields to providers throughout the state as of the end of fiscal year 20.



AASA worked with the area agencies on aging to distribute PPE, including face coverings for older adults and direct care workers, throughout the state.

AASA produced several resources and guidance documents for older adults and their informal and professional caregivers, as well as reopening guidance for Older American Act funded programs and services. AASA staff helped to support the MDHHS COVID-19 hotline, which ran seven days per week.

The aging network also responded to the following weather-related issues/disasters:

- Mid-Michigan flooding in May 2020.
- Extreme heat conditions statewide in July 2020.
 - Created a guide for coping with heat at home as opposed to visiting a cooling center due to the COVID-19 pandemic.



Programmatic Highlights

The **Retired Senior Volunteer Program (RSVP)**, **Senior Companion Program (SCP)** and **Foster Grandparent Program (FGP)** with a total of **3,856** volunteers, were impacted by COVID-19. Volunteers pivoted to deliver programs virtually through programs such as friendly reassurance calls and pen pal programs.

Michigan Medicare/Medicaid Assistance Program (MMAP), Inc. provided high quality and accessible health benefit information and counseling, supported by a statewide network of skilled professionals to **85,460** older Michiganders and Michiganders with disabilities, helping them save **\$51 million** last year.

A total of 7,688 older adults participated in **evidence-based disease-prevention programming**. Due to the pandemic, classes had to be offered virtually for the majority of the year.

Senior Community Service Employment Program (SCSEP), a community service, work-based training program, provided employment opportunities to 276 low-income and unemployed adults age 55 and over.

Adult Community Placement (ACP) allows individuals on Medicaid to live safely in the least restrictive community-based setting. This program served approximately 2,000 individuals.

Senior Project FRESH/Market FRESH provided approximately 20,000 participants with coupons at registered farmers markets and roadside stands.



Funding Highlights

AASA secured \$3,443,592 in additional funding secured in fiscal year 20.

Secured **\$498,898** from the Michigan Health Endowment Fund for National Core Indicators-Aging and Disability (NCI-AD). Michigan is one of 28 states participating in this initiative.

Secured a **\$1,705,454** competitive grant from the Administration for Community Living (ACL) for Aging and Disability Resource Council (ADRC) No Wrong Door critical relief funding for COVID-19 pandemic response.

Secured a **\$314,251** coronavirus rapid response grant from the Michigan Health Endowment Fund to implement GetSetUp, CV-19 Checkup and to launch the Michigan aging toll-free hotline.

Secured **\$232,500** from ACL for Boxes, Bags and Buddies, a three-year grant designed to promote meal preparation skills by allowing home delivered meals clients to select an optional meal rather than the menu selections. Social connectedness is also encouraged through having “buddies” assist with meal preparation.

Secured **\$692,489** from the Ryan White Rebate for Food and Friendship Connections, a program decrease social isolation and food insecurity in a population often stigmatized, isolated and expanding in number as people with HIV are not only surviving but thriving with new medical interventions and research.



AAA 1B staff distributing Q Boxes



Aging and Adult Services Agency FY 20 budget

Aging and Adult Services administration	\$8,727,600*
Community services	\$45,966,300
Employment assistance	\$3,500,000
Nutrition services	\$42,254,200
Respite care program	\$6,468,700
Senior volunteer service programs	\$4,765,300**

Gross Appropriations	\$111,682,100
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Appropriated From:

Federal revenues

Capped federal revenues	\$249,700
Total other federal revenues	\$59,094,200

Special revenue funds

Total private revenues	\$520,000
Michigan merit award trust fund	\$4,068,700
Total other state restricted revenues	\$2,000,000
State general fund/general purpose	\$45,749,500
Total Federal and Special Appropriations	\$ 111,682,100

* AASA administration received a \$140,000 reduction to the operating budget in July 2020.

**Senior volunteer service programs received a \$1.7 million reduction in funding in July 2020.

Total Grant Funding – Families First Coronavirus Response Act & CARES Act

FFCRA III-CMC2	\$2,533,623
FFCRA III-HDC2	\$5,067,245
FFCRA Total	\$7,600,868
CARES Act III-B	\$6,334,057
CARES Act III-C	\$15,201,736
CARES Act III-E	\$3,099,016
CARES Act VII Ombudsman	\$633,406
CARES total	\$25,268,215
Grand Totals	\$32,869,083



Aging and Adult Services Agency Staff

Executive Office

- Dr. Alexis Travis
- Brenda Ross
- Scott Wamsley
- Jen Hunt

Supportive Adult Services Section

- Cynthia Farrell
- Jane Alexander
- Dawn Jacobs
- Michelle McGuire
- Rachel Richards
- Rachel Telder

Health Promotion & Active Aging Section

- Sophia Hines
- Sherri King
- Tari Muñiz
- Sally Steiner
- Lauren Swanson
- Julia Thomas

Operations & Aging Network Support Division

- Amy Colletti
- Christy Livingston

Technical Assistance & Quality Improvement Section

- Steve Betterly
- Cindy Albercht
- Emma Buycks
- Annette Gamez
- Laura McMurtry
- Becky Payne

Financial Quality & Grant Support Section

- Amy Colletti
- Gloria Lanum
- Ashley O'Neil
- Terri Simon



Commission on Services to the Aging

Commission on Services to the Aging 2020 Membership

Dona J. Wishart, Chair (R), Gaylord

- O. Matthew Adeyanju* (I), Big Rapids
- Mark Bomberg (R), Gladstone
- William Bupp (D), DeWitt
- Renee Cortright* (R), Troy
- Georgia Crawford-Cambell (D), Detroit
- Nancy Duncan (I), Lansing
- Walid A. Gammouh (R), Macomb
- Marshall Greenhut (D), North Muskegon
- L. Kathleen LaTosch (D), Ferndale
- Peter Lichtenberg, PhD (D), Farmington
- Guillermo Z. Lopez (D), Lansing
- Tene-Sandra Milton-Ramsey (D), Detroit
- Michael L. Pohnl (I), East Lansing
- Robert Schlueter (I), Leland
- Linda Strohl (I), Swayer
- Kristie E. Zamora (I), Flint

*denotes Commission departure in 2020

State Advisory Commission to the Commission on Services to the Aging

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Donald Ryan (1946 – 2020), Co-Vice **Chairperson, Kalamazoo**

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- Beverly Bryan, Lapeer
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- Glenn Clemence, Imlay City
- Charles Corwin, Prudenville
- Danna Downing, Vicksburg
- Sandra Falk-Michaels, Livonia
- Carl Gibson, Marshall
- Marjorie Hobe, Horton
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- Gerald McCole, Channing
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- Ann Randolph, Trenton
- Patricia Rencher, Detroit
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- Joseph Sowmick, Mt. Pleasant
- Joseph Sucher, Clarkston
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- Elizabeth Adie Thompson, Ypsilanti
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- Jo Ver Beek, Holland
- Susan Vick, St. Helen
- Mark Weber, Grosse Pointe Farms
- Lori Wells, Traverse City
- Eric Williams, Kentwood
- Karen Wintringham, South Lyon
- John Zimmerman, Traverse City
- Ex-Officio: Robyn Ford, Social Security Administration



Area Agency on Aging Planning and Service Areas

- Region 1-A DETROIT AREA AGENCY ON AGING, 313.446.4444, serving cities of Detroit, the Grosse Pointes, Hamtramck, Harper Woods, Highland Park
- Region 1-B AREA AGENCY ON AGING 1-B, 248.357.2255, serving Livingston, Macomb, Monroe, Oakland, St. Clair, Washtenaw Counties
- Region 1-C THE SENIOR ALLIANCE, INC., 734.722.2830, serving all of Wayne County, excluding areas served by Region 1-A
- Region 2 REGION 2 AREA AGENCY ON AGING, 517.592-1974, serving Hillsdale, Jackson, Lenawee Counties
- Region 3-A REGION 3-A AREA AGENCY ON AGING, 269.373.5147, serving Kalamazoo County
- Region 3-B REGION 3-B AREA AGENCY ON AGING, 269.966.2450, serving Barry, Calhoun Counties
- Region 3-C BRANCH/ST. JOSEPH AREA AGENCY ON AGING III-C, 517.278.2538, serving Branch, St. Joseph Counties
- Region 4 REGION IV AREA AGENCY ON AGING, INC., 269.983.0177, serving Berrien, Cass, Van Buren Counties
- Region 5 VALLEY AREA AGENCY ON AGING, 810.239.7671, serving Genesee, Lapeer, Shiawassee Counties
- Region 6 TRI-COUNTY OFFICE ON AGING, 517.887.1440, serving Clinton, Eaton, Ingham Counties
- Region 7 REGION VII AREA AGENCY ON AGING, 989.893.4506, serving Bay, Clare, Gladwin, Gratiot, Huron, Isabella, Midland, Saginaw, Sanilac, Tuscola Counties
- Region 8 AREA AGENCY ON AGING OF WESTERN MICHIGAN, INC., 616.456.5664, serving Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Newago, Osceola Counties
- Region 9 REGION IX AREA AGENCY ON AGING, 989.356.3474, serving Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Presque Isle, Roscommon Counties
- Region 10 AREA AGENCY ON AGING OF NORTHWEST MI, INC., 231.947.8920, serving Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Wexford Counties
- Region 11 UP AREA AGENCY ON AGING, 906.786.4701, serving Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, Schoolcraft Counties
- Region 14 SENIOR RESOURCES, 231.739.5858, serving Muskegon, Oceana, Ottawa Counties



Area Agency on Aging Planning and Service Areas

